STATE OF MICHIGAN

FILE N	U	١.
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JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	STATEMENT TO ACCOMPANY RELEASE	
In the matter of adoptee Full name of chil	d	DOB:
1. I am the parent or guardian of the a	doptee and I intend to sign a release of the child fo	or purposes of adoption.
2. I have received a list of adoption su	pport groups.	
☐ 3. I intend to release the child to a common MCL 722.956(1)(c).	child placing agency. I have received a copy of the	written document described in
4. ☐ I have received counseling related ☐ I waive counseling related to this		
5. I have not received or been promise as itemized on the schedule filed with	ed any money or anything of value for the release of the release.	of the child, except for lawful payments
	e is not affected by any collateral or separate agree agency to whom the child is to be released.	ment between myself and the adoptive
	adoptee is served if the parent keeps the child plac any health problems that the parent develops that	
Family Independence Agency in ord	adoptee is served if I keep my address current wit der to permit a response to any inquiry concerning or from an adoptee who is 18 years or older.	
I declare under penalty of perjury that information, knowledge, and belief.	this statement has been examined by me and that	its contents are true to the best of my
Date	Signature of parent or guardia	an
	Name of parent or guardian (p	print)
	Address	
	City, state, zip	Telephone no.
	Do not write below this line - For court use only	